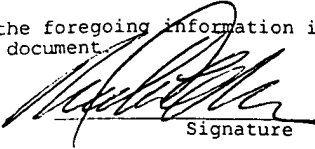


PHN 17,812

Form PTO 1595 (Rev. 6-93)	RECORDATION FORM COVER SHEET PATENTS ONLY	U.S. Dept. of Commerce Patent and Trademark Office
Commissioner for Patents: Please record the attached original documents or copy thereof.		
<p>1. Name of conveying party(ies): MARCEL RENE BOHMER NICOLAAS KOOYMAN</p> <p>Additional name(s) of conveying party(ies) attached?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>2. Name and address of receiving party(ies): Name: <u>U.S. Philips Corporation</u> Internal Address:</p> <p>Street Address: <u>1251 Avenue of the Americas</u></p> <p>City: <u>New York</u> State: <u>NY</u> Zip: <u>10020-1104</u></p> <p>Additional name(s) & address(es) attached?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>3. Nature of conveyance:</p> <p><input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger</p> <p><input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Terms</p> <p><input type="checkbox"/> Other</p> <p>Execution Date: 11/01/00; 11/06/00</p>	<p>4. Application number(s) or patent number(s):</p> <p>If this document is being filed together with a new application, the execution date of the application, is 11/01/00; 11/06/00</p> <p>A. Patent Application No.(s) B. Patent No.(s)</p> <p>NONE YET Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>5. Name and address of party to whom correspondence concerning document should be mailed:</p> <p>Name: <u>U.S. Philips Corporation</u></p> <p>Internal Address:</p> <p>Street Address: <u>580 White Plains Road</u></p> <p>City: <u>Tarrytown</u> State: <u>NY</u> Zip: <u>10591</u></p>	<p>6. Total number of applications and patents involved: 1</p> <p>7. Total fee (37 CFR 3.41) ...\$<u>40.00</u></p> <p><input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to Deposit Account</p> <p>8. Deposit Account Number: <u>14-1270</u></p> <p>(Attach duplicate copy of this page paying by deposit account)</p>	
DO NOT USE THIS SPACE		
<p>9. Statement and signature.</p> <p>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <p>Michael E. Marion, Reg. 32,266 Name of Person Signing</p> </div> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <p><u>12/5/00</u> Date</p> </div> </div> <p>Total number of pages including cover sheet, attachments, and document: <u>2</u></p>		

Mail documents to be recorded with required cover sheet information to:
Commissioner for Patents
Box Assignments
Washington, D.C. 20231

 1c843 U.S. PTO
09/730656


DECLARATION and POWER OF ATTORNEY

ATTORNEY'S DOCKET NO.:
PHN 17.812 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
"Semic nduct r device c mprising a security coating and smartcard pr vided with such a devic "
the specification of which (check one)

☒ is attached hereto.

☐ was filed on _____ as Application Serial No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by the amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APP. NUMBER	DATE OF FILING (DATE, MONTH, YEAR)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
Eur pe	99204177.2	9 December 1999	YES

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

PRIOR UNITED STATES APPLICATION(S)

APPLICATION SERIAL NUMBER	FILING DATE	STATUS (PATENTED, PENDING, ABANDONED)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

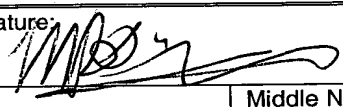
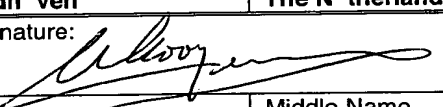
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Jack E. Haken, Reg. No. 26,902

Michael E. Marion, Reg. No. 32,266

Edward Blocker, Reg. No. 30,245

SEND CORRESPONDENCE TO: Corporate Patent Counsel; U.S. Philips Corporation; 580 white Plains Road; Tarrytown, NY 10591	DIRECT TELEPHONE CALLS TO: (name and telephone No.) (914) 332-0222
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Dated: November 1, 2000		Inventor's Signature: 	
Full Name of in Inventor	Last Name BOHMER	First Name Marcel	Middle Name René
Residence & Citizenship	City Eindhoven	State of Foreign Country The Netherlands	Country of Citizenship The Netherlands
Post Office Address	Street Pr f. H Istlaan 6	City 5656 AA Eindh ven	State of Country The N therlands Zip Code
Dated: November 6, 2000		Inventor's Signature: 	
Full Name of in Inventor	Last Name KOOYMAN	First Name Nicolaas	Middle Name
Residence & Citizenship	City Eindhoven	State of Foreign Country The N th rlands	Country of Citizenship Th N therlands
Post Office Address	Street Pr f. H Istlaan 6	City 5656 AA Eindhoven	State of Country therlands Zip Code